

KENTUCKY DEPARTMENT OF AGRICULTURE
Division of Food Distribution
100 Fair Oaks Lane, Suite 502
Frankfort, KY 40601

DESIGNATED PERSONNEL FOR FOOD ALERT/EMERGENCY FEEDING (KY-FD-22)

Please advise the Food Distribution Office of the designated personnel in your Agency to be contacted in case of a Food Alert or declared Emergency. **Any changes in this information must be provided to the Food Distribution Office within ten (10) days of change.**

Name of R/A: _____ County: _____

Address: _____ City: _____ Zip: _____

PLEASE CHECK (/) IF APPLICABLE: (If no changes have occurred it is not necessary to complete the information below.)

_____ **The information on the KY-FD-22 form on file in the Food Distribution Office is correct.**

1. Primary Contact Person: _____ 2. Title: _____

3. Telephone No.: _____
Office Home

4. Alternate Contact Person: _____ 5. Title: _____

6. Telephone No.: _____
Office Home

INSTRUCTIONS FOR DESIGNATED PERSONNEL FOR FOOD ALERT/EMERGENCY FEEDING

Recipient Agency address: Self-explanatory

1. Primary Contact Person: Enter the name of the system/agency representative to be contacted first in case a Food Alert or declared Emergency occurs.
2. Title: Enter job title of designated person.
3. Telephone Numbers: Enter the telephone number where the designated person can be reached, during working hours and after normal business hours.
4. Alternate: Enter the name of an alternate representative to be contacted if primary representative is unavailable, and provide information requested.

Personal information provided will be used for the described purpose only and will not be released by the Food Distribution Office.